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	Application Number	10/719,010	
١	Filing Date	11/24/2003	
	First Named Inventor	Xi	
	Art Unit	2837	
	Examiner Name	SAN MARTIN, EDGARDO	
	Attorney Docket Number	MINB-02013/A-3057	

ENCLOSURES (Check all that apply)							
Ø	Fee Trans	smittal Form		Drawing(s)		After All	lowance communication to (TC)
	☐ Fee	e Attached		Licensing-related Papers			Communication to Board of and Interferences
☑	Amendme	ent / Reply		Petition		Appeal	Communication to TC Notice, Brief, Reply Brief)
	☐ Afte	er Fina <u>l</u>		Petition to Convert to a Provisional Application		Proprie	etary Information
	☐ Affi	davits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address		Status	Letter
Extension of Time Request Express Abandonment Request Information Disclosure Statement			Terminal Disdaimer		Other E below):	Enclosure(s) (please identify	
			Request for Refund				
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Certified Copy of Priority				☐ Landscape Table on CD			
Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53				narks			
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT							
Firm Name Adduci, Mastriani, & Schaumberg, L.L.P.							
Signatu	ге	Tair	7				
Printed	name	David G. Posz	/				
Date 12 July 2005			F	Reg. No.	37,701		
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I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.							
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JUL 1 2 2005 Fees pursuant to the Consolidered Appropriations Act, 2005 (H.R. 4818). 10/719,010 .Application Number 11/24/2003 Filing Date FEE TRANSMITTAL Χi First Named Inventor For FY 2005 SAN MARTIN, EDGARDO **Examiner Name** Art Unit Applicant Claims small entity status. See 37 CFR 1.27 2837 TOTAL AMOUNT OF PAYMENT Attorney Docket No. (\$) 1,020 MINB-02013/A-0357 METHOD OF PAYMENT (check all that apply) ☐ Check ☐ None Other (please identify): Deposit Account Deposit Account Number: 01-0305 Deposit Account Name: Adduci, Mastriani, & Schaumberg, L.L.P. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES** Small Entity **Small Entity** Small Entity **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fees Paid (\$) Utility 300 150 500 250 200 100 Design 200 100 100 130 65 50 Plant 200 100 300 150 160 80 300 150 500 Reissue 250 600 300 **Provisional** 160 80 0 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee Description Fee (\$) Fee (\$) Each daim over 20 or, for Reissues, each daim over 20 and more than in the original patent 50 25 Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 100 Multiple dependent daims 360 180 Total Claims **Extra Claims** Fee (\$) Fee Paid (\$) **Multiple Dependent Claims** 20 or HP = Fee Paid (\$) Fee (\$) HP = highest number of total claims paid for, if greater than 20 Indep. Claims **Extra Claims** Fee Paid (\$) Fee (\$) -3 or HP = HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is (\$ for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s). **Total Sheets** Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) (round up to a whole number) 4. OTHER FEE(S) Fees Paid(\$) Non-English Specification, \$130 fee (no small entity discount) Other: 3-MONTH EXTENSION FEE \$1,020.00

SUBMITTED BY				
Signature	77601	Registration No. (Attorney/Agent) 37,701	Telephone	(202) 467-6300
Name (Print/Type)	DAVID G. POSZ		Date	12 July 2005